

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000147015

**Entity Name:** BSSE, LLC

**Current Principal Place of Business:**

ROTHORN-CENTER 1,  
SOERENBERG/LU, CH-6174

**Current Mailing Address:**

ROTHORN-CENTER 1,  
SOERENBERG/LU, CH-6174 CH

**FEI Number:** 33-1226321

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SCHUTT, DARRIN ESQ.  
1322 S.E. 46TH LANE, SUITE 202  
CAPE CORAL, FL 33904 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name STRAEHLER, BEAT FRANZ  
Address ROTHORN-CENTER 1,  
City-State-Zip: SOERENBERG/LU CH-6174

Title MGRM  
Name EMMENEGGER, SILVIA  
Address ROTHORN-CENTER 1,  
City-State-Zip: SOERENBERG/LU CH-6174

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STRAEHLER , BEAT FRANZ

**MGRM**

**01/05/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date